

ON-SITE REVIEW
AFTER SCHOOL SNACK PROGRAM

Name of School Food Authority (SFA) _____

Name of After School Program Site _____

The site named above is considered "Area Eligible". (Check appropriate box.) YES NO

Date of Review _____ Time of Arrival _____ Time of Departure _____

Place a check mark in the appropriate box following each statement. A "NO" response to any of the following statements indicates an area requiring corrective action.

1. Snack counts are taken at the point of service. YES NO

Each snack must be counted at the point of service. Point of service is defined as that point where it can accurately be determined that a reimbursable snack has been served to a child.

2A. "Area Eligible" sites only: All snack counts are claimed in the "free" category.

YES NO

2B. Sites which are NOT "area eligible": Snack counts are recorded by category (free, reduced, or paid).

YES NO

Each person responsible for snack counts can correctly document eligibility information based on ticket, token or roster codes or based on area eligibility of the site. "Area Eligible" is defined as being located in an area served by a school in which at least 50% of the children enrolled are certified for free or reduced price meals.

3. Adequate procedures are in place to prevent the claiming of more than one reimbursable snack per child per day.

YES NO

Only one reimbursable snack per child per day may be claimed for reimbursement. A second snack served to a child may not be claimed.

4. Reimbursement is NOT claimed for snacks served on weekends or holidays. (Residential institutions, please see "Exception" below.)

YES NO

*Reimbursement cannot be received for after school snacks served on weekends or holidays, including vacation periods which occur during the regular school year. **Exception:** residential child care institutions may be claim reimbursement for snacks served on weekends, holidays or vacation periods as long as the snack is served during an activity that takes place after an education activity that is determined to be an integral part of the curriculum or an actual extension of the local education system.*

5. Snacks claimed are served to eligible individuals. YES NO

Children are eligible to participate through age 18 and if a student's nineteenth birthday occurs during the school year, reimbursement may be claimed for snacks served to that individual during the remainder of the school year. Reimbursement may also be claimed for individuals, regardless of age, who are determined by the State agency to be mentally or physically disabled.

6. Snacks served meet the minimum portion and component requirements. (See attached form for guidance.) YES NO

Snacks served must meet the meal pattern for snacks. Portions for children ages 13 through 18+ are no less than the portions stipulated for children ages 6 through 12.

7. After School Snack Program menus are available for review. YES NO

Regulations require that documentation of compliance with meal pattern requirements is maintained on file.

8. After School Program attendance records are available for review. YES NO

Regulations require that documentation of individual children's attendance is maintained on a daily basis in order to keep track of the children present on a given day.

9. The After School Program provides children with regularly scheduled activities (excluding inter-scholastic sporting activities) in a structured and supervised setting.

YES NO

The purpose of this program is to provide care in after school settings.

10. The After School Program provides care to children after their school day has ended.

YES NO

Snacks may NOT be claimed for reimbursement in programs operated before or during the child's school day.

Total # of children in attendance on the day of review.

Total # of snacks observed being served the day of review.

Total # of snacks claimed for reimbursement on the day of review.

Total # of "free" snacks claimed on the day of review.

Total # of "reduced" snacks claimed on the day of review.

Total # of "paid" snacks claimed on the day of review.

A “NO” response to any of the previous statements indicates an area requiring corrective action. Use the attached Corrective Action Plan Form to identify the problem and the corrective action to be taken. A Follow-up Review must be conducted within 45 calendar days.

Anticipated Date of Follow-Up Review _____

Signature and Title of Reviewer

Date

NOTES: